

POSITION	IN. IALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	MM	512	08-21-01
RESPONSE FORMALITY REVIEW	SCB	1091	10-17-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	
Original	
1	✓
2	✗
3	✗
4	✓
5	○
6	✓
7	
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11	
12	✗
13	○
14	○
15	✓
16	
17	✗
18	○
19	○
20	✓
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37	
38	○
39	○
40	✗
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45	✓
46	✓
47	✓
48	○
49	✓
50	✓

Claim	Date
Final	
Original	
51	✓
52	✗
53	✗
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60	✓
61	○
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68	N
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90	
91	N
92	✗
93	✓
94	✓
95	✓
96	○
97	○
98	✓
99	✓
100	

Claim	Date
Final	
Original	
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Best Available Copy

If more than 150 claims or 10 actions
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20876
08/21/01
SCB